

United States Senate  
Office of the Democratic Leader  
Washington, DC 20510-7010

December 10, 2003

The Honorable Donald Rumsfeld  
Secretary  
U.S. Department of Defense  
The Pentagon  
Washington, DC 20301

Dear Mr. Secretary:

Last Friday *USA Today* reported that roughly 150 American military personnel stationed in Iraq have been diagnosed with leishmaniasis, a disease transmitted to humans through the bite of infected sand flies that produces highly painful and disfiguring lesions on the skin and face. Even more disturbing was a report the following day in the *New York Times*, which asserted that many units stationed in Iraq contain between 100 and 200 soldiers that "have been badly bitten and are in danger of developing the disease," which can have a substantial incubation period.

Monday's report that 20 soldiers from the 101<sup>st</sup> Airborne Division have been sent to Walter Reed Army Medical Center for treatment speaks to the debilitating nature and ongoing threat of this disease. In addition, military blood banks recently have imposed a one-year moratorium on donations by those who have served in Iraq, for fear that they may be unknowing carriers of the disease.

In addition to leishmaniasis, our soldiers in Iraq have been at risk of contracting wound infections from multi-drug-resistant organisms, such as *Acinetobacter*. Wound infections are not only life-threatening, they also raise the probability that patients will require limb amputations. Ensuring that wound infection patients receive the right drug quickly in the field can make the difference between life and death, or between keeping or losing a limb; however, there are still only a few drugs that can effectively treat many infections. With *Acinetobacter* infections in particular, available drugs are very expensive. Much more research into which antibiotics work best is greatly needed.

Surprisingly, it appears that funding shortages to the Military Infectious Diseases Research Program (MIDRP) are preventing us from adequately investigating treatment and prevention options for these two severe threats to our military personnel serving in Iraq. For example, funding for research into prevention, diagnosis, and treatment of leishmaniasis was halted in 2002. With research stalled, physicians are forced to treat our soldiers with Pentostam, a toxic drug with several serious side effects, even though promising alternatives are ready to be tested. The lack of alternatives for treating leishmaniasis is one result of inadequate funding for crucial activities of the MIDRP.

Due to the pressing nature of this problem and its implications for our soldiers' ability to complete their missions in Iraq, Afghanistan, and elsewhere, I ask that you take action to reallocate at least \$5 million in Department of Defense (DoD) funds from outside the Pentagon's health research accounts to allow funding for work on the research that will help us prevent and treat these conditions. This issue is both urgent and ongoing; our soldiers are already suffering from these diseases, and there is every reason to believe that they will continue to be exposed to their causes.

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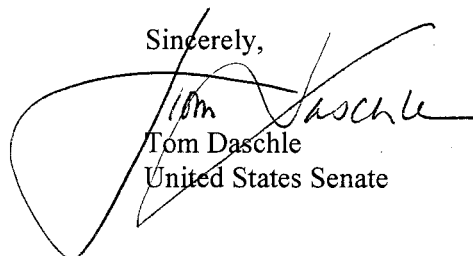
Finally, the past few months have seen another dangerous infectious disease threaten our troops: malaria. As you know, 69 of the 147 American soldiers (44 percent) who spent at least one night on the ground during our recent operation in Liberia contracted the disease. Malaria is lethal; each year, over two million people die from it. The Army and the Navy are pursuing important malaria research, and shifting additional funds to the MIDRP to accelerate its research efforts in this area could help physicians achieve more rapid diagnosis, improved personal protective measures, development of prevention and/or treatment drugs, and, eventually, a vaccine. As the global war on terrorism necessitates an increased U.S. military presence in Africa and the South Pacific, it is crucial that our armed forces have the most advanced resources available to them for preventing and treating this disease, so I ask that you also identify additional funds to accelerate this important research.

As our troops travel to Iraq and other points across the globe to defeat terrorism and promote democracy, it is an unfortunate fact that they must also battle a hidden enemy: infectious disease. Reallocating significant resources to the MIDRP will fund the research that will help our troops defeat this enemy. As you know, since September 11, 2001, Congress has appropriated nearly \$170 billion in supplemental funding for DoD's efforts in the war on terrorism and Operation Iraqi Freedom. Within this great sum, I am hopeful you will be able to find the resources needed to more effectively battle the life-threatening diseases facing the soldiers who are carrying out these missions. If the Department of Defense cannot find room in its budget to provide the MIDRP with at least \$5 million to fight leishmaniasis and wound infections, and additional resources to battle malaria, I would ask you to submit a funding request to Congress.

Providing our military doctors the resources they need to prevent and treat leishmaniasis, wound infections, and malaria is critical to the strength of our forces and the success of our missions. I look forward to working with you to provide our troops this essential support.

With best wishes, I am

Sincerely,



Tom Daschle  
United States Senate